Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

09/506125

CLAIMS AS FILED - PART I							SMALL	ENTITY		OTHER	
_		T	(Column 1)		(Column 2)		TYPE		OR	SMALL	ENTITY
FOR		NU	NUMBER FILED		NUMBER EXTRA		RATE	FEE] [RATE	FEE
ВА	SIC FEE		*					345.00	OR		690.00
TC	TAL CLAIMS	2	5 mil	nus 20=	. 5		X\$ 9=		OR	X\$18=	90. sz
INC	EPENDENT CL	AIMS	3 minus 3 =		<u> </u> *		X39=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT							+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	TOTAL		OR	TOTAL	78000
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINII AFTER AMENDME	NG R	PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus			=	X39=		OR	X78=	
_	FIRST PRESE	NTATION C	OF MULTIPLE	DEPEN	DENT CLAIM		+130=		OR	+260=	
							TOTAL	 		TOTAL	
		(0.1	4)	,,	O O.	(0-10)	ADDIT. FE	· L	OR	ADDIT. FEE	
		(Column		(0	Column 2) HIGHEST	(Column 3)	ADDIT. FE			ADDIT. FEE	ADDI
ENT B			S NG R	Р		(Column 3) PRESENT EXTRA	ADDIT. FEE	ADDI- TIONAL FEE	Joh	ADDIT. FEE	ADDI- TIONAL FEE
NDMENT B	Total	CLAIMS REMAINII AFTER	S NG R	Р	HIGHEST NUMBER REVIOUSLY	PRESENT		ADDI- TIONAL	OR		TIONAL
AMENDMENT B	Independent	CLAIMS REMAINII AFTER AMENDMI	S NG R ENT Minus Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA = =	RATE	ADDI- TIONAL	OR	RATE	TIONAL
AMENDMENT B		CLAIMS REMAINII AFTER AMENDMI	S NG R ENT Minus Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA = =	X\$ 9= X39=	ADDI- TIONAL	OR OR	RATE X\$18= X78=	TIONAL
AMENDMENT B	Independent	CLAIMS REMAINII AFTER AMENDMI	S NG R ENT Minus Minus	P	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA = =	X\$ 9= X39= +130=	ADDI- TIONAL FEE	OR OR OR	RATE X\$18= X78= +260=	TIONAL
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AMENDMENT B	Independent	CLAIMS REMAINII AFTER AMENDMI * NTATION C	S NG R Minus Minus OF MULTIPLE	++ ++ E DEPENI	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2)	PRESENT EXTRA = =	X\$ 9= X39= +130=	ADDI- TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL	TIONAL
၁	Independent	CLAIMS REMAINII AFTEF AMENDMI * * NTATION C	S NG RENT Minus Minus OF MULTIPLE OF NG RENT	DEPENI	HIGHEST NUMBER REVIOUSLY PAID FOR * DENT CLAIM	PRESENT EXTRA = =	X\$ 9= X39= +130=	ADDI- TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL	TIONAL
၁	Independent	CLAIMS REMAINII AFTER AMENDMI * * NTATION C (Column CLAIMS REMAINII AFTER	S NG RENT Minus Minus OF MULTIPLE OF NG RENT	DEPENI	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY	PRESENT EXTRA = = (Column 3) PRESENT	X\$ 9= X39= +130= TOTAL ADDIT. FEE	ADDI-TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE	ADDI- TIONAL
၁	Independent FIRST PRESE	CLAIMS REMAINII AFTEF AMENDMS * * * * * * * * * * * * *	Minus Minus Minus Minus Minus Minus Minus Minus Minus	DEPENI	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA = (Column 3) PRESENT EXTRA	RATE X\$ 9= X39= +130= TOTAL ADDIT. FEE RATE X\$ 9=	ADDI-TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18=	ADDI- TIONAL
	Independent FIRST PRESE Total	CLAIMS REMAINII AFTER AMENDMI * * CLAIMS REMAINII AFTER AMENDMI * *	S NG RENT Minus Minus OF MULTIPLE O 1) S NG RENT Minus Minus Minus	DEPENI	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA = (Column 3) PRESENT EXTRA = = =	RATE X\$ 9= X39= +130= TOTAL ADDIT. FEE	ADDI-TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE	ADDI- TIONAL
AMENDMENT C	Independent FIRST PRESE Total Independent FIRST PRESE	CLAIMS REMAINII AFTER AMENDMI * * NTATION C (Column CLAIMS REMAINII AFTER AMENDMI * * NTATION C	Minus	DEPENI	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM	PRESENT EXTRA = = (Column 3) PRESENT EXTRA = =	RATE X\$ 9= X39= +130= TOTAL ADDIT. FEE RATE X\$ 9= X39= +130=	ADDI-TIONAL FEE	OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18= X78= +260=	ADDI- TIONAL
AMENDMENT C	Independent FIRST PRESE Total Independent	CLAIMS REMAINII AFTER AMENDMI * * NTATION C CLAIMS REMAINII AFTER AMENDMI * * * NTATION C	Minus Minus	DEPENI Column 2 N THIS SP	HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2) HIGHEST NUMBER REVIOUSLY PAID FOR DENT CLAIM Column 2)	PRESENT EXTRA = = (Column 3) PRESENT EXTRA = = = slumn 3. an 20, enter "20."	RATE X\$ 9= X39= +130= TOTAL ADDIT. FEE X\$ 9= X39= +130= TOTAL	ADDI-TIONAL FEE	OR OR OR OR	RATE X\$18= X78= +260= TOTAL ADDIT. FEE RATE X\$18= X78=	ADDI- TIONAL